

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	Not yet known
	Filing Date	Herewith
	First Named Inventor	Scherff, William Louis
	Group Art Unit	Not yet known
	Examiner Name	Not yet known
	Attorney Docket Number	714595.114

I hereby appoint:

☒ Practitioners at Customer Number
OR

27128

 Place Customer
 Number Bar Code
 Label here

☐ Practitioner(s) named below:

Name	Registration Number

 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in
 the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.
OR
☐ Firm or
 Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.7.1.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name

Richard J. Schwartze

Vice President, Secretary and Chief Corporate Counsel

Signature

Date

7/15/03

 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are
 required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.